## STATEMENT OF **ORGANIZATION**

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NAME OF COMMITTEE (in	ı full)	(Check if is change		Example over the	e:If typing, type e lines.	12FE4	og organiyan; lM5 udlamikan/karel	ķ	
ARTHUR	RICH	FOR CON	IGRE	SS,				<del>                                     </del>	
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ADDRESS (number a	nd street)	P.O. BO	X 696		<u> </u>		1111	<del></del>	لللل
(Check if address is changed)		GARLAN	1D			NC	284	41,	
			(	CITY		STATE		ZIP CODE	
		SS (Please provide only one e-mail address)   ARICHFORCONGRESS@OUTLOOK.COM							
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(Check if is change)  2. DATE  COMMITTEE'S WEB	address d)	<u>, www.</u>	RTHU	JRRI(	CHFORC	ONGR	ESS.C	OM	
3. FEC IDENTIFIC	CATION NU	JMBER	C	ar Janesari ar Garesona					
4. IS THIS STATE	MENT 🔀	NEW (N)	OR		AMENDED (A)				
I certify that I have of Type or Print Name		ARTHU	RRIC	=	wledge and belie	f it is true, co	rrect and con	nplete.	
Signature of Treasure	er	Sethen B	0			Date	02" ′ 1	8 ′ 2(	)14 🐪
NOTE: Submission of		ous, or incompuse i ANY CHANGE IN II		•		•	•	alties of 2 U.S	S.C. §437g.
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